

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 4																																															
1. CONTRACT PURCH ORDER/AGREEMENT NO. DAAE07-03-D-N116			2. DELIVERY ORDER/CALL NO. 0003		3. DATE OF ORDER/CALL (YYYYMMDD) 2004JUN17		4. REQUISITION/PURCH REQUEST NO. SEE SCHEDULE		5. PRIORITY DXA4																																																
6. ISSUED BY TACOM WARREN BLDG 231 AMSTA-AQ-AHPA TROY HAARALA (586)574-7214 WARREN, MICHIGAN 48397-5000 EMAIL: HAARALAT@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL			CODE W56HZV		7. ADMINISTERED BY (If other than 6) DCMA CLEVELAND ADMIRAL KIDD CENTER. 555 EAST 88TH STREET BRATENAH, OH 44108-1068 SCD: A PAS: NONE ADP PT: HQ0337			CODE S3603A		8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)																																															
9. CONTRACTOR LEARN ROMEC DIVISION, CRANE CO. 241 SOUTH ABBE ROAD NAME AND ADDRESS ELYRIA, OH. 44036 TYPE BUSINESS: Large Business Performing in U.S.			CODE 51663		FACILITY		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE			11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED																																															
12. DISCOUNT TERMS Net 30 Days			13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Block 15																																																						
14. SHIP TO SEE SCHEDULE			CODE		15. PAYMENT WILL BE MADE BY DFAS - COLUMBUS CENTER DFAS-CO/NORTH ENTITLEMENT OPERATION P.O. BOX 182266 COLUMBUS OH 43218-2266				CODE HQ0337		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2																																														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="3" style="width: 10%; text-align: center; vertical-align: middle;">16. TYPE OF ORDER</td> <td style="width: 10%; text-align: center;">DELIVERY/ CALL</td> <td style="width: 5%; text-align: center;"><input checked="" type="checkbox"/></td> <td colspan="9" style="padding: 5px;">THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.</td> </tr> <tr> <td style="text-align: center;">PURCHASE</td> <td></td> <td colspan="9" style="padding: 5px;">Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____.</td> </tr> <tr> <td colspan="11" style="padding: 5px;">furnish the following on terms specified herein.</td> </tr> <tr> <td colspan="12" style="padding: 5px;">ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.</td> </tr> </table>												16. TYPE OF ORDER	DELIVERY/ CALL	<input checked="" type="checkbox"/>	THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.									PURCHASE		Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____.									furnish the following on terms specified herein.											ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.											
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<table style="width:100%;"> <tr> <td style="width: 30%; text-align: center;">NAME OF CONTRACTOR</td> <td style="width: 30%; text-align: center;">SIGNATURE</td> <td style="width: 30%; text-align: center;">TYPED NAME AND TITLE</td> <td style="width: 10%; text-align: center;">DATE SIGNED (YYYYMMDD)</td> </tr> </table> <p><input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:</p>												NAME OF CONTRACTOR	SIGNATURE	TYPED NAME AND TITLE	DATE SIGNED (YYYYMMDD)																																										
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17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE																																																									
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT																																														
		SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price KIND OF CONTRACT: Supply Contracts and Priced Orders																																																							
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.						24. UNITED STATES OF AMERICA RONALD KRAUS /SIGNED/ KRAUSR@TACOM.ARMY.MIL (586)574-7158 BY: _____ CONTRACTING/ORDERING OFFICER				25. TOTAL \$48,708.00																																															
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED																																																									
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE																																																	
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE						28. SHIP. NO.		29. D.O. VOUCHER NO.		30. INITIALS																																															
f. TELEPHONE NUMBER						g. E-MAIL ADDRESS																																																			
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.						<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR																																															
a. DATE (YYYYMMDD)						b. SIGNATURE AND TITLE OF CERTIFYING OFFICER																																																			
						<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL				34. CHECK NUMBER																																															
										35. BILL OF LADING NO.																																															
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.																																															

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE07-03-D-N116/0003 MOD/AMD	Page 2 of 4
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Name of Offeror or Contractor: LEAR ROMEC DIVISION, CRANE CO.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0011	SUPPLIES OR SERVICES AND PRICES/COSTS NSN: 3120-01-120-3716 FSCM: 51663 PART NR: RG38634 SECURITY CLASS: Unclassified				
0011AA	<u>PRODUCTION QUANTITY</u> NOUN: BEARING,SLEEVE PRON: EH4RA192EH PRON AMD: 01 ACRN: AA AMS CD: 060011 <u>Description/Specs./Work Statement</u> TOP DRAWING NR: TDP RG38634 DATE: 17-JUN-2003 <u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: COMMERCIAL PACKAGING UNIT PACK: 001 INTERMEDIATE PACK: 001 LEVEL PRESERVATION: Commercial LEVEL PACKING: Commercial <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin <u>Deliveries or Performance</u> DOC SUPPL <u>REL CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG CD</u> <u>MARK FOR</u> <u>TP CD</u> 001 W56HZV4118S856 W31G1Z J 1 <u>DEL REL CD</u> <u>QUANTITY</u> <u>DEL DATE</u> 001 59 08-NOV-2004 FOB POINT: Origin SHIP TO: <u>FREIGHT ADDRESS</u> (W31G1Z) XR W0L7 ANNISTON MUNITIONS CENTER TRANS OFFICER 256 235 6837 CL V 7 FRANKFORD AVE BLDG 380 ANNISTON AL 36201-4199 <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE07-03-D-N116/0003	59	EA	\$ 82.00000	\$ 4,838.00
0011AB	<u>PRODUCTION QUANTITY</u> NOUN: BEARING, SLEEVE	535	EA	\$ 82.00000	\$ 43,870.00

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Name of Offeror or Contractor: LEAR ROMEC DIVISION, CRANE CO.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	<p>PRON: EH43S736EH PRON AMD: 01 ACRN: AA AMS CD: 060011</p> <p><u>Description/Specs./Work Statement</u> TOP DRAWING NR: TDP RG38634 DATE: 17-JUN-2003</p> <p><u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: COMMERCIAL PACKAGING UNIT PACK: 001 INTERMEDIATE PACK: 001 LEVEL PRESERVATION: Commercial LEVEL PACKING: Commercial</p> <p><u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u> DOC SUPPL <u>REL CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG CD</u> <u>MARK FOR</u> <u>TP CD</u> 001 W56HZV4118S855 W25G1U J 1 <u>DEL REL CD</u> <u>QUANTITY</u> <u>DEL DATE</u> 001 535 08-NOV-2004</p> <p>FOB POINT: Origin</p> <p>SHIP TO: <u>FREIGHT ADDRESS</u> (W25G1U) XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE07-03-D-N116/0003</p>				

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MOD/AMD

Name of Offeror or Contractor: LEAR ROMEC DIVISION, CRANE CO.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/							JOB		
ITEM	MIPR	ACRN	OBLG STAT	ACCOUNTING CLASSIFICATION				ORDER NUMBER	ACCOUNTING STATION	OBLIGATED AMOUNT
0011AA	EH4RA192EH 060011	AA	2	97	X4930AC9D	6D	26KB	S20113	W56HZV	\$ 4,838.00
0011AB	EH43S736EH 060011	AA	2	97	X4930AC9D	6D	26KB	S20113	W56HZV	\$ 43,870.00
									TOTAL	\$ 48,708.00

SERVICE						ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>
Army	AA	97	X4930AC9D	6D	26KB S20113	W56HZV	\$ 48,708.00
						TOTAL	\$ 48,708.00